

**BY ORDER OF THE COMMANDER
482D FIGHTER WING**



**HOMESTEAD AIR RESERVE BASE
INSTRUCTION 48-137**

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Aerospace Medicine

HARB RESPIRATORY PROTECTION

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This instruction implements This instruction establishes procedures for administering Air Force Policy Directive (AFPD) 48-1, *Aerospace Medical Program* and Air Force Occupational Safety and Health (AFOSH) Standard 48-137, *Respiratory Protection Program*. It implements 29 CFR 1910.134, *Respiratory Protection* and covers procedures to implement a respiratory protection plan at Homestead Air Reserve Base (HARB), Florida. It applies to all 482d Fighter Wing (482 FW) military and civilian personnel placed on respiratory protection by 482d Mission Support Group MSG/ Bioenvironmental Engineering (482 MSG/SGPB). In addition, this HARBI applies to all units and organizations assigned to or associated with HARB. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the Air Force (AF) Form 847, *Recommendation for Change of Publication*; route AF Form 847s from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/gcss-af61a/afirms>. It also requires the collection and maintenance of information protected by the Privacy Act (PA) of 1974. The authority to collect and maintain records prescribed in this instruction is 10 U.S.C. 8013 and Air Force Instruction (AFI) 33-332., *Air Force Privacy Program*. System of Records notice 035 AF MP 0--Unit Assigned Personnel Information applies. /. Additionally, if the publication generates a report(s), alert readers in a statement and cite all applicable Reports Control Numbers in accordance with AFI 33-324, *The Information Collections and Reports Management Program: Controlling Internal, Public, and Interagency Air Force Information Collections*.

SUMMARY OF CHANGES

This instruction has been significantly revised and should be reviewed in its entirety. Updates include: contingency use of respiratory protection; revised supervisor responsibilities; workplace specific written plan elements; unit deployment manager (UDM) responsibilities; revised drop off location for completed medical evaluation questionnaires; restriction for privately procured respirators by government employees in Air Force workplaces; revised training requirements; revised fit testing requirement; quantitative fit testing (QNFT) procedures for M-50 gas mask testing; revised medical clearance and medical evaluation questionnaires process.

1. Definitions.

1.1. Refer to AFOSHSTD 48-137, *Respiratory Protection (RP) Program*, **Attachment 1**, for a list of definitions of terms used in connection with this program.

1.2. Workplace supervisors are defined as supervisors with oversight of shop operations of individuals placed on the RP Program. These individuals may or may not be on the RP Program themselves and include shop chiefs, shift leaders, team leaders, etc.

1.3. Program Managers are defined as individuals appointed to maintain the workplace RP program.

2. Responsibilities. Responsibilities are described in AFOSHSTD 48-137. Additional local responsibilities regarding the implementation of this base respiratory protection program are addressed below.

2.1. Supervisors will:

2.1.1. If he or she is the overall workplace supervisor (flight commander or shop chief), appoint a program manager to maintain a workplace-specific RP Program and provide a signed appointment letter to 482 MSG/SGPB.

2.1.2. Ensure personnel on the RP program fulfill their annual respirator fit testing requirements as described out in section 7.1. Appointments are made by contacting 482 MSG/SGPB at extension 415-7603.

2.1.3. Receive RP supervisor training from 482 MSG/SGPB when assigned to a new workplace with a RP program.

2.1.4. Provide shop members with workplace-specific RP training upon initial assignment to the RP program and annually thereafter.

2.1.5. Ensure personnel wear the respirators specified for the tasks certified by 482 MSG/SGPB as documented in shop RP OI. Respirator use other than what has been specified in the RP OI is prohibited.

2.2. Workplace RP Program Mangers will:

2.2.1. Maintain a RP Program as described in section 4 of this instruction and other governing regulations.

2.2.2. Contact 482 MSG/SGPB as needed for information and guidance regarding respiratory protection matters. In case of emergency after duty hours, a 482 MSG/SGPB

representative may be reached through the 482d Fighter Wing, Command Post (482 FW/CP) at extension 415-7023.

2.2.3. Provide a copy of the respirator medical clearance and medical evaluation questionnaires (MEQ), Section 7, whenever new personnel are assigned to their unit. The completed questionnaires will be dropped off by each individual to 482d Medical Squadron (482 MDS) for screening.

2.2.4. Provide a current copy of the workplace-specific written program to the BE to review during medical evaluations.

2.2.5. Maintain a shop-specific Respiratory Protection Program operating instruction (OI) using the template provided by 482 MSG/SGPB. If there are any changes in the shop operations, the supervisor will inform 482 MSG/SGPB of these changes so 482 MSG/SGPB can evaluate the process accordingly and the RPP OI can be updated by the supervisor.

2.2.6. Instruct personnel not to smoke, chew gum, eat, and/or drink caffeinated or carbonated beverages at least 30 minutes prior to a respirator fit test as these activities can negatively affect the results of test.

2.2.7. Update 482 MSG/SGPB of personnel roster changes to the shop roster.

2.3. Unit Deployment Managers (UDM) will (IAW AFMAN 32-4006):

2.3.1. Ensure all unit personnel are scheduled for Quantitative Fit Test (QNFT) within 90 days of arriving at HARB.

2.3.2. Schedule unit personnel CBRN mask fit tests through BE at extension 415-7603.

2.3.3. Ensure a copy of each individual's CBRN mask QNFT documentation is located in the appropriate mobility folder (or equivalent) and gas mask carrier.

2.3.4. UDMs are responsible for tracking unit personnel QNFT status and maintaining records of fit tests.

3. Selection, Use and Limitation.

3.1. 482 MSG/SGPB will work with workplace supervisors regarding the selection, use, and limitations of respirators and respirator filters on HARB, in accordance with AFOSH STD 48-137, Chapter 4. These decisions will be based on the potential hazards present in the workplace.

3.2. Workplace supervisors and RP managers will call 482 MSG/SGPB whenever they have a question about the need for a respirator or the proper type of respirator for a particular operation.

3.3. Air Force workplaces shall use only government-authorized respirators. No privately procured respirators or filtering face piece devices (dust masks) will be used in Air Force workplaces.

3.4. Only respirators and filters and/or cartridges certified to adequately control inhalation hazards may be used. Before procurement obtain certification of respiratory protection from 482 MSG/SGPB.

4. Workplace – Specific Respiratory. PROGRAMS.

4.1. Maintain current copies of governing regulations and program justification including:

4.1.1. AFOSH STD 48-137.

4.1.2. 29 CFR 1910.134.

4.1.3. This instruction.

4.1.4. Copies of workplace-specific BE exposure monitoring and surveillance results (482 MSG/SGPB assessments).

4.2. Develop and maintain shop-specific RP Program Operating Instruction (OI) covering:

4.2.1. A list of hazardous processing requiring RP and the respirators and filters/cartridges authorized for each.

4.2.2. Respirator care and maintenance, and filter swap-out procedures.

4.2.3. Proper wear of the respirators in routine and emergency situations.

4.2.4. Hazards encountered while wearing respirators.

5. Contingency Operations Respirator.

5.1. In general, respiratory protection for contingency operations requiring use of respirators will be handled on a case-by-case basis and will involve input by 482 MSG/SGPB along with information about hazards gathered by disaster response forces and with the direction of incident management leadership.

6. Training.

6.1. 482 MSG/SGPB will conduct respiratory protection training for HARB personnel as follows:

6.1.1. 482 MSG/SGPB will provide supervisor-level training for workplace supervisors and assigned RP Program Managers of shops with a RP Program. Training will include the requirements of 29 CFR 1910.134 (k). Training must be given when newly assigned to a workplace on the RP Program. This training will be documented on the supervisor or program manager's Air Force (AF) Form 55, *Employee Safety and Health Record* or electronic equivalent.

6.1.2. Initial and Annual Training-Workplace. Supervisors or RP program managers who have received training from 482 MSG/SGPB will provide workplace-specific respirator training upon initial assignment to the RP program and annually thereafter. The individual's shop will document this training on the individual's AF Form 55 or electronic equivalent.

6.2. Teams that are established for the purpose of responding to emergencies or rescues, such as fire and emergency services personnel, shall be properly trained in the use of their respirators. Each team will develop a workplace-specific written plan to address respiratory training requirements.

7. Fit Testing.

7.1. BE manages all industrial respirator fit testing, both initial and annual. Fit testing by 482 MSG/SGPB is done by appointment, and is scheduled after receiving the individual's medical clearance from 482 MDS. No fit testing will be allowed prior to receiving medical clearance.

7.2. 482 MSG/SGPB will issue an Industrial Respirator Fit Test form to individuals upon completion of the fit test. This form is to be kept on record per shop procedures.

7.3. 482 MSG/SGPB will conduct initial Chemical, Biological, Radiological, Nuclear and Explosive (CBRNE) mask fit testing and re-accomplished if a new size or type of mask is issued, the individual gains/losses 10% or more of body weight following completion of the initial QNFT or the individual experiences extensive dental work, facial surgery, scarring or disfigurement.

7.4. 482 MSG/SGPB will maintain electronic CBRNE fit test records for documentation purposes only.

8. Care, Inspection & Maintenance of Respirators.

8.1. All workplaces involved in the Respiratory Protection Program must follow the guidelines stated in AFOSH STD 48-137, Chapter 9. Shops using supplied air respirators are required to conduct breathing air sampling as determined by Technical Order (TO) 42B-1-22, *Quality Control of Compressed and Liquid Breathing Air*. A copy of the sampling results must be sent to 482 MSG/SGPB and filed in the workplace Respiratory Protection Program binder.

9. Medical Clearances & Medical Evaluation Questionnaires (MEQ).

9.1. INITIAL: Individuals need to be medically cleared prior to respirator wear, fit testing, and training. Individuals will be given respirator medical evaluation questionnaires to fill out and deliver to the 482 MDS for review and approval. Once medically cleared, fit testing and training can be scheduled for the individual.

9.2. 482 MSG/SGPB will maintain the date of the individual's MEQ in a RP database.

9.3. The MEQ will be filed in the individual's medical record. 482 MDS is responsible for filing the evaluation questionnaires in the medical records.

9.4. ANNUAL: During the annual Preventative Health Assessment (PHA), the individual will be required to fill out a MEQ if one has not been filed in their medical record. This MEQ will go through the same medical clearance process as mentioned above and will be documented in PIMR (Preventive Health Assessment and Individual Medical Readiness) database.

9.5. Personnel can call the 482 MSG/SGPB at 415-7603 with any questions concerning this subject.

10. Filtering Face Piece Device (FFPD).

10.1. With the stipulations in this section, FFPDs (i.e., N-95) are the only type of voluntary use respiratory protection that may be worn at the discretion of a government employee "for comfort purposes" in an Air Force workplace. They cannot be worn for any industrial task that requires the wear of a respirator for protection against inhalation hazards.

10.2. Individuals who elect to wear FFPDs must receive initial and annual training from the workplace supervisor.

10.3. Supervisors shall clearly train workers on the limitations of these devices. The training will be documented on the individual's AF Form 55 or equivalent.

10.4. Supervisors will be trained on the limitations of the FFPD by BE during the Supervisor-Level Respirator Training. The supervisor's training will also be documented on the AF Form 55 or equivalent. Individuals who wear FFPDs must be trained on all information included in [Attachment 2](#).

11. Administrative Procedures.

11.1. All Respirators should be ordered through base GSA mart when possible.

11.2. When new respirators are purchased shops must procure necessary fit testing attachments for BE if necessary.

12. Procedures for Program Evaluation.

12.1. BE will conduct an annual evaluation of the 482 FW Respiratory Protection Program and report the findings in writing to the Aerospace Medicine Council.

12.2. BE will review or check for the following during routine health risk assessments: shop's RPP OI; condition of respirators on hand; and storage location of respirators in the shop. 482 MSG/SGPB will also re-evaluate the need for RP based upon current work practices.

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Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

Adopted Forms

AF Form 847, Recommendation for Change of Publication

Abbreviations and Acronyms

AFOSH—Air and Force Occupational Safety and Health

AFMAN—Air Force Manual

AFRIMS—Air Force Records Information Management System

CBRNE—Chemical, Biological, Radiological, Nuclear and Explosive

FFPD—Filtering Face Piece Device

HARB—Homestead Air Reserve Base

IDLH—Immediately Dangerous to Life and Health

MEQ—Medical Evaluation Questionnaires

MSG—Mission Support Group

NIOSH—National Institute of Occupational Safety and Health

OI—Operating Instruction

PHA—Preventative Health Assessment

PIMR—Preventative Health Assessment and Individual Medical Readiness

QNFT—Quantitative Fit Testing

RDS—Records Disposition Schedule

RP—Respiratory Protection

UDM—Unit Deployment Manager

Attachment 2

FILTERING FACE PIECE DEVICES & TRAINING

A2.1. Filtering face piece devices (FFPD) are not considered by the US Air Force to be respiratory protection for purposes of AFOSHSTD 48-137, *Respiratory Protection Program*. These devices may be worn strictly for comfort purposes if an Air Force employee desires to wear them.

A2.1.1. Filtering face piece device users must be trained by their supervisor initially and annually on the limitations of these devices.

A2.2. FFPD Limitations:

A2.2.1. FFPDs shall be NIOSH (National Institute of Occupational Safety and Health) approved N95 FFPDs for protection against dusts and mists ONLY. That is, they remove some particles, but not gases and vapors.

A2.2.2. FFPDs will NOT remove carbon monoxide, solvents, paint vapor, cleaning solutions vapor, fuel vapors, alcohol vapors and acids.

A2.2.3. FFPDs may remove wood dust, cement dust, dirt (from sweeping or work that kicks up the soil), mists and fiberglass. This will only happen IF you are able to maintain a good face-to-face piece seal.

A2.3. FFPDs are NEVER to be worn during tasks for which respiratory protection is required, as specified by the Bioenvironmental Engineering Flight.

A2.4. FFPDs are NEVER to be used in atmospheres that could be immediately dangerous to life and health (IDLH).

A2.5. FFPDs are NEVER to be used in atmospheres containing less than 19.5 percent oxygen.

A2.6. Follow the manufacturer's instruction for replacing FFPDs. In general, if you detect breathing resistance (i.e., it becomes more difficult to breathe through the FFPD, you must replace the FFPD.)

A2.7. Procedures for Donning FFPD:

A2.7.1. Inspect the FFPD prior to each use. Check the elasticity and tightness of headbands, fasteners and adjusters. Check exhalation valves (if FFPD has them) for cracks, tears, dirt, or build-up of material between valve and valve seat. Check the filter material for tears or cracks.

A2.7.2. Fit face piece on nose-bridge making sure that you are able to breathe through nose. Then swing bottom of face piece into contact with the chin. Position headbands with one strap above the ears and over the crown of the head, and the other strap below the ears, around the nape of the neck. Adjust for comfortable fit by lengthening or shortening straps. Adjust the straps just snug enough so that no air leaks around the face piece. The nose piece should be molded into your face by using the two hand method. Pinching the bridge over your nose with one hand often results in uneven pressure and a poor seal.

A2.7.3. Hair (stubble, mustache, sideburns, and beard) which passes between the face and the sealing surface of the FFPD will interfere with the seal and will reduce the FFPD

effectiveness. A head covering which passes between the sealing surface of an FFPD and the wearer's face (stocking cap, ball cap) will reduce the effectiveness of the FFPD.

A2.8. Cleaning and Storage.

A2.8.1. Cleaning and sanitizing FFPDs is not necessary. At the end of the shift or when the FFPD is dirty or breathing resistance has increased, the FFPD should be discarded.

A2.8.2. FFPDs shall be stored to protect against dust, sunlight, heat, extreme cold, excessive moisture and chemicals. FFPDs shall not be stored in chemical storage cabinets, lockers, rooms or areas.

A2.9. If you suspect you or your co-workers may be overexposed to a particular chemical (for instance, if you are experiencing physical symptoms), you must contact 482 MSG/SGPB at extension 415-7603 so air sampling can be performed and chemical exposure levels determined. In addition, if you are experiencing a suspected occupational illness, it must be reported to BE at extension 415-7603 and investigated.